

# How to Enroll a Nursing Facility

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- What is a Trusted User?

- Applicants may give a trusted person permission to talk to Medicaid about their application, see their information, and act on their behalf. This person is a “Trusted User”.
- The Trusted User is responsible for fulfilling all responsibilities to the same extent as the individual the Long Term Care (LTC) facility represents.
- The Trusted User agrees to maintain, or be legally bound to maintain, the confidentiality of any information regarding the applicant or beneficiary provided by the Louisiana Department of Health (LDH).
- The Trusted User will adhere to the regulations in 42 CFR Part 431, Subpart F and at 45 CFR 155.260(f) (relating to the confidentiality of information), 42 CFR 447.10 (relating to the prohibition against reassignment of provider claims as appropriate for a facility or an organization acting on the facility’s behalf), as well as other relevant state and federal laws concerning conflicts of interest and confidentiality of information.

- What are the benefits of enrolling as a Trusted User?

- Trusted Users may view the status of any applications they submitted through Medicaid’s online application and enrollment system, known as the [Self-Service Partner Portal](#).
- Managers may view the status of all applications submitted by Trusted Users at the sites they manage.

- What is a Satellite Location?

- The Louisiana Nursing Home Association has been enrolled as a Primary Location.
- Each nursing facility that registers on the Self-Service Partner Portal is a “satellite” of the primary location.

## Steps to Enroll the Nursing Facility

1. Administrator enrolls the nursing facility

- Fill out the online form to become a Satellite Location, located here: [LNHA Satellite Location Registration](#)
- Complete all fields and click the submit button at the bottom of the page.

2. Administrator prints and signs the following forms, found [here](#).

- LNHA- 2 Contract Package
- Contractual Agreement
- Administrator / CEO Confidentiality Statement
- Agreements and Responsibilities
- HIPAA Business Associate Addendum

3. Administrator sends the forms listed in step 2 to Louisiana Medicaid by email to [LNHATrustedUsers@la.gov](mailto:LNHATrustedUsers@la.gov) or by fax at (866) 852-5672 or (225) 389 -8059.

4. Within five business days, the Administrator will receive an email from Louisiana Medicaid through the [LNHATrustedUsers@la.gov](mailto:LNHATrustedUsers@la.gov) email account that includes the Location ID.

5. The Administrator is responsible for sharing the Location ID with everyone that they determine needs to enroll as a Trusted User.

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